

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MD	75331	
O.I.P.E. CLASSIFIER	MHN	59	01-15-00
FORMALITY REVIEW	DW	72246	2-3-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	02/03/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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BEST AVAILABLE COPY